

PERSONAL AWARD RECOMMENDATION

ENSURE ALL BLOCKS ARE FILLED IN, SIGNED AND DATED.
COMPLETE MAILING ADDRESSES ARE REQUIRED

FROM: ADDRESS:		TO: (Awarding Authority) ADDRESS: UIC/RUC:			
COMMAND POC:		PHONE#			
1. SOCIAL SECURITY NUMBER		2. DESIG/NEC/MOS			
3. NAME (Last, first, MI)		14. EXP. OF ACTIVE DUTY IF RETIREMENT/SEPARATION, NUMBER OF YEARS 15. EST. DETACHMENT DATE <input type="checkbox"/> RETIREMENT <input type="checkbox"/> TRANSFER <input type="checkbox"/> TERMINAL LEAVE			
4. COMPONENT (USN, USMC, etc.)		16. NEW DUTY STATION (Home address if separation anticipated)			
5. GRADE/RATE		ADDRESS:			
6. WARFARE DESIGNATOR		7. UIC/RUC:			
8. RECOMMENDED AWARD <small>(see instruction #3 on back)</small>		9. SPECIFIC ACHIEVEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO			
10. <input type="checkbox"/> HEROIC <input type="checkbox"/> MERITORIOUS <input type="checkbox"/> HEROIC POSTHUMOUS <input type="checkbox"/> MERITORIOUS POSTHUMOUS <input type="checkbox"/> MIA		19. PREVIOUS PERSONAL DECORATIONS AND PERIOD RECOGNIZED (exclude Purple Heart and Combat Action Ribbon)			
11. NUMBER OF AWARD OF RECOMMENDED MEDAL					
12. ACTION DATE/MERITORIOUS PERIOD					
13. GEOGRAPHIC AREA OF ACTION/SERVICE		20. PERSONAL AWARDS RECOMMENDED-NOT YET APPROVED			
22. I certify that the facts contained in the summary of action are		<input type="checkbox"/> known to me <input type="checkbox"/> a matter of record			
NAME, GRADE, TITLE OF ORIGINATOR		SIGNATURE			
		DATE			
23. FORWARDING ENDORSEMENTS BY VIA ADDRESSEE(S). (Attach additional sheets only as necessary)					
VIA	COMMAND <small>(To be completed by originator)</small>	RECOMMENDED AWARD	COMBAT "V"	SIGNATURE, GRADE	DATE FWD
1			<input type="checkbox"/> YES <input type="checkbox"/> NO		
2			<input type="checkbox"/> YES <input type="checkbox"/> NO		
3			<input type="checkbox"/> YES <input type="checkbox"/> NO		
24. TO BE COMPLETED BY AWARDING AUTHORITY					
DISPOSITION OF BASIC RECOMMENDATION		COMBAT "V"	EXTRAORDINARY HEROISM RECOMMENDED	SIGNATURE, GRADE, TITLE	DATE APPROVED
		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
FOR USE OF NDBDM ONLY					
FROM: SECNAV (NDBDM)				DATE:	
TO: CNO (NO9B33) CMC (CODE MHM)					
1. Extraordinary heroism recommended <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA					
2. Reviewed and recorded				By direction	

INSTRUCTIONS

1. Before completing this form see SECNAVIST 1650.1F

2. The Summary of Action (item 24) is requested (except for *Command approved NAMS*). In addition attach a double spaced proposed citation.

3. Two (2) letter codes to be used in blocks 8, 19, 20, 23, and 24

MH - Medal of Honor

NX - Navy Cross

DM - Distinguished Service Medal

SS - Silver Star

LM - Legion of Merit

LV - Legion of Merit with V

DX - Distinguished Flying Cross

DV - Distinguished Flying Cross with V

NM - Navy & Marine Corps Medal

BS - Bronze Star

BV - Bronze Star with V

PH - Purple Heart Medal

MM - Meritorious Service Medal

AS - Air Medal - Strike/Flight

AF - Air Medal - Individual Action

AH - Air Medal - Individual Action with V

JC - Joint Service Commendation Medal

NC - Navy Commendation Medal

CV - Navy Commendation Medal with V

JA - Joint Service Achievement Medal

NA - Navy Achievement Medal

NV - Navy Achievement Medal with V

CR - Combat Action Ribbon

25. SUMMARY OF ACTION (*not required for Command approved NAMS*)